PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10714983

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN R SMALL ENTITY	
TC	OTAL CLAIMS		5				· [RATE	FEE	7	RATE	FEE
FOR			NUMBER	NUMBER FILED		NUMBER EXTRA		BASIC FEE	385.00	OR	BASIC FEE	770.00
ТС	OTAL CHARGEA	ABLE CLAIMS	5 min	5 minus 20≈		*		X\$ 9=		OR	X\$18=	
	DEPENDENT CL			/ minus 3 =		*		X43=		OR	X86=	
MU	ILTIPLE DEPEN	NDENT CLAIM PF	RESENT					+145=		OR	+290=	
* If	the difference	e in column 1 is	less than ze	ero, enter	· "0" in c	olumn 2	L	TOTAL		OR	TOTAL	770
CLAIMS AS AMENDED - PART II								İ		1	OTHER	
		(Column 1)		(Colun	mn 2)	(Column 3)	, ,	SMALL		OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIC PAID I	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	* ENTATION OF MU	Minus	***		=	[X43=		OR	· X86=	
Ш	FIRST PRESE	NIATION OF INIC	JLHPLE DEF	PNDEN	CLAIIVI		1	+145=		OR	+290=	
j	i 🖟							TOTAL ADDIT. FEE		_ '	TOTAL ADDIT. FEE	
'		(Column 1)		(Colum	nn 2)	(Column 3)		JUDII. FEE B		1 ′	40011. I LL	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	EST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=	╽┟	X43=		OR	X86=	
لـــا	FIRST PHESE	ENTATION OF MU	LTIPLE UEF	ENDENT	CLAIM		, L	+145=		OR	+290=	
					,	:	L	TOTAL		OD L	TOTAL	
		(Column 1)	•	(Colum	nn 2)	(Column 3)	A	DDIT. FEE L		,	ADDIT. FEE L	
AMENDMENT C	V (CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	EST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
N N	Total .	ļ	Minus	**		= .		X\$ 9=		OR	X\$18=	
AME	Independent	1	Minus	***		=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									Ī	200-	
* If the entry in column 1 is less than the ntry in column 2, write "0" in column 3.										OR	+290= TOTAL	·
** 11	If th "Highest Nun	mber Previously Pai mber Pr viously Pa	iid For' IN THIS	S SPACE is	s less than	n 20, enter "20."	, AI	DDIT. FEE		OR A	DDIT. FEE	
		nber Previously Paid					r foun	d in the app	ropriate box	in colu	ımn 1.	